

Application or Docket Number

09/823506

PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT	(37 CFR 1.16(d))	

SMALL ENTITY	OR
RATE	OTHER THAN
\$. . .	SMALL ENTITY
X \$. . . *	
X \$. . . =	
+ \$. . . *	
TOTAL	

OTHER THAN	SMALL ENTITY
RATE	FEES
\$. . .	
X \$. . . *	
X \$. . . =	
+ \$. . . *	
TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2.

AMENDMENT A - FIRST

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	18	Minus ** 20	=
Independent (37 CFR 1.16(b))	3	Minus *** 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

SMALL ENTITY	OR
RATE	ADDITIONAL FEE
X \$. . . =	
X \$. . . =	
+ \$. . . =	
TOTAL ADD'L FEE	

OTHER THAN	SMALL ENTITY
RATE	ADDITIONAL FEE
X \$. . . =	
X \$. . . =	
+ \$. . . =	
TOTAL ADD'L FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	18	Minus ** 20	=
Independent (37 CFR 1.16(b))	3	Minus *** 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDITIONAL FEE
X \$. . . =	
X \$. . . =	
+ \$. . . =	
TOTAL ADD'L FEE	

RATE	ADDITIONAL FEE
X \$. . . =	
X \$. . . =	
+ \$. . . =	
TOTAL ADD'L FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))		Minus **	=
Independent (37 CFR 1.16(b))		Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			

RATE	ADDITIONAL FEE
X \$. . . =	
X \$. . . =	
+ \$. . . =	
TOTAL ADD'L FEE	

RATE	ADDITIONAL FEE
X \$. . . =	
X \$. . . =	
+ \$. . . =	
TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public, which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT APPLICATION FEE DETERMINATION RECORD

Schedule 6 Form PTO-678

Application of Case Number

09/823506

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	
INDEPENDENT CLAIMS (37 CFR 1.16(d))	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		-

* If the difference in column 1 is less than zero, enter "0" in column 2.

SMALL ENTITY

OR OTHER THAN
SMALL ENTITY

DATE	FEES	DATE	FEES
X 1 =		X 1 =	
X 1 =		X 1 =	
X 1 =		X 1 =	
X 1 =		X 1 =	
X 1 =		X 1 =	
	TOTAL		TOTAL

CLAIMS AS AMENDED - PART II

4-11-05

(Column 1)

(Column 2) (Column 3)

AMENDMENT	CLAIMS REquiring AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESent EXTRA
Total or Cols	18	Minus	20	0
Independent or Cols	3	Minus	3	
FIRST PREDETERMINATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(e))				

SMALL ENTITY

OR OTHER THAN
SMALL ENTITY

DATE	ADDITIONAL FEE	DATE	ADDITIONAL FEE
X 1 =		X 1 =	
X 1 =		X 1 =	
X 1 =		X 1 =	
X 1 =		X 1 =	
	TOTAL ADDITIONAL FEE		X 1 =

7-19-05

(Column 1)

(Column 2) (Column 3)

AMENDMENT	CLAIMS REquiring AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESent EXTRA
Total or Cols	18	Minus	20	0
Independent or Cols	3	Minus	3	
FIRST PREDETERMINATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(e))				

SMALL ENTITY

OR OTHER THAN
SMALL ENTITY

DATE	ADDITIONAL FEE	DATE	ADDITIONAL FEE
X 1 =		X 1 =	
X 1 =		X 1 =	
X 1 =		X 1 =	
X 1 =		X 1 =	
	TOTAL ADDITIONAL FEE		X 1 =

8-17-05

(Column 1)

(Column 2) (Column 3)

AMENDMENT	CLAIMS REquiring AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESent EXTRA
Total or Cols	18	Minus	20	0
Independent or Cols	3	Minus	3	
FIRST PREDETERMINATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(e))				

SMALL ENTITY

OR OTHER THAN
SMALL ENTITY

DATE	ADDITIONAL FEE	DATE	ADDITIONAL FEE
X 1 =		X 1 =	
X 1 =		X 1 =	
X 1 =		X 1 =	
X 1 =		X 1 =	
	TOTAL ADDITIONAL FEE		X 1 =

* If the entry in column 1 is less than the entry in column 2, enter "0" in column 2.

* If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20".

* If the "Highest Number Previously Paid For" (Total or Independent) is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. This information is required to obtain or retain a benefit by the person which is to the (and by the USPTO to process) an application. Confidentiality is guaranteed by 35 U.S.C. 122 and 37 CFR 1.10. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and transmitting the required information from the USPTO. This will vary depending upon the individual case. Any comments or the amount of time you require to complete this form should be provided for submitting this form, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-0450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-0450.

If you need assistance in completing this form, call 1-800-PTO-5000 and select option 2.

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

Application or Docket Number

09823506

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 =	*
INDEPENDENT CLAIMS	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

11-12-03 (Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	18	Minus	20	<input checked="" type="checkbox"/>
Independent	3	Minus	3	<input checked="" type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

326-A4 (Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	16	Minus	20	<input checked="" type="checkbox"/>
Independent	3	Minus	3	<input checked="" type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

9/23/04 (Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	18	Minus	20	<input checked="" type="checkbox"/>
Independent	3	Minus	3	<input checked="" type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE OTHER THAN OR SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	385.00	OR BASIC FEE	770.00
XS 9=		OR XS18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL		OR TOTAL	

SMALL ENTITY OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
XS 9=		OR XS18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
XS 9=		OR XS18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
XS 9=		OR XS18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

09823506

Application or Docket Number

FERN-P001D

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	15	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	15 minus 20 =	0
INDEPENDENT CLAIMS	3 minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE <input checked="" type="checkbox"/>		OTHER THAN SMALL ENTITY	
RATE	FEES	RATE	FEES
BASIC FEE	355.00	OR BASIC FEE	710.00
X\$ 9=		OR X\$18=	
X40=		X80=	
+135=		+270=	
TOTAL	355	OR TOTAL	

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	15	Minus	.. 20 =
Independent	3	Minus	... 3 =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

SMALL ENTITY OR		OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	15	Minus	.. 20 =
Independent	3	Minus	... 3 =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

RATE ADDITIONAL FEE		RATE ADDITIONAL FEE	
X\$ 9=		OR X\$18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	15	Minus	.. 23 =
Independent	3	Minus	... 3 =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

RATE ADDITIONAL FEE		RATE ADDITIONAL FEE	
X\$ 9=		OR X\$18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.